

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date:: July 9, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

**Computer Readable Form
(CFR)?::**

Number of Copies of CFR::

Title:: Method for Complementing Personal Lost Memory Information with Communication, and Communication System, and Information Recording Medium Thereof

Attorney Docket Number:: 32011-190646

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: Japan
Country:: Japan
Status:: Full Capacity
Given Name:: Koji
Middle Name::
Family Name:: Yamashita
Name Suffix::
City of Residence:: Tokyo
State or Province of Residence::
Country of Residence:: Japan
Street of Mailing Address:: c/o Communications Research Laboratory,
Independent Adminstrative Institution, 4-2-1, Nukui-
Kitamachi, Koganei-shi
City of Mailing Address:: Tokyo
**State or Province of Mailing
Address::**
Country of Mailing Address:: Japan
**Postal or Zip Code of Mailing
Address::**

Applicant Authority Type:: Inventor
Primary Citizenship:: Japan
Country:: Japan
Status:: Full Capacity
Given Name:: Kenichi
Middle Name::
Family Name:: Matsumura
Name Suffix::
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State or Province of Residence::

Country of Residence:: Japan
Street of Mailing Address:: c/o Communications Research Laboratory,
Independent Adminstrative Institution, 4-2-1, Nukui-
Kitamachi, Koganei-shi,
City of Mailing Address:: Tokyo
**State or Province of Mailing
Address::**
Country of Mailing Address:: Japan
**Postal or Zip Code of Mailing
Address::**

Applicant Authority Type:: Inventor
Primary Citizenship:: Japan
Country:: Japan
Status:: Full Capacity
Given Name:: Hidekazu
Middle Name::
Family Name:: KUBOTA
Name Suffix::
City of Residence:: Tokyo
State or Province of Residence::
Country of Residence:: Japan
Street of Mailing Address:: c/o Communication Research Laboratory,
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City of Mailing Address:: Tokyo
**State or Province of Mailing
Address::**
Country of Mailing Address:: Japan
**Postal or Zip Code of Mailing
Address::**

Applicant Authority Type:: Inventor

Primary Citizenship:: Japan
Country:: Japan
Status:: Full Capacity
Given Name:: Toyoaki
Middle Name::
Family Name:: Nishida
Name Suffix::
City of Residence:: Tokyo
State or Province of Residence::
Country of Residence:: Japan
Street of Mailing Address:: c/o Communication Research Laboratory,
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Correspondence Information

**Correspondence Customer
Number::** 26694
Phone Number:: 202-962-4800
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Representative Information

**Representative Customer
Number::** 26694

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	038009/2003	2/17/2003	Yes

Assignee Information

Assignee Name::

Communications Research Laboratory

Street of Mailing Address::

Independent Adminstrative Institution, 4-2-1 Nukui-Kitamachi,Koganei-shi

City of Mailing Address::

Tokyo

State or Province of Mailing Address::

Country of Mailing Address:: Japan

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